Massachusetts Official
Absentee Ballot Application
by a Family Member

This application is for
use by a family member of:

- A registered voter who will be unable to vote at the polls on Election Day due to:
  (1) absence from the voter's city or town during normal polling hours; or
  (2) physical disability preventing the voter from going to the polling place; or
  (3) religious belief;

OR

- A non-registered voter who is:
  (1) a Massachusetts citizen absent from the state; or
  (2) an active member of the armed forces or merchant marines, their spouse or dependent; or
  (3) a person confined in a correctional facility or a jail, except if by reason of felony conviction.

How to use this form

Box 1. Check all the boxes that apply to the voter. If the absentee ballot is to be used for a primary, circle the applicable party. Remember, a voter may not participate in one party's primary, if the voter is registered as a member of another party. Contact the voter's town clerk, city clerk or election commission if he or she is unsure of their party designation.

Box 2. Print the voter's name: last name, first name, middle name or initial.

Box 3. Print the address where the voter is registered: number and street name or rural route number and box number (do not provide: a post office box number), apartment number, city or town and full zip code.

Box 4. The ballot will be mailed to the voter. Print the voter's mailing address if it is different from their legal voting residence. If the voter is applying for absentee ballots for all elections this year, he shall notify the town clerk, city clerk or election commission of a change of mailing address.

1 This absentee ballot application is being made for:

☐ a primary (circle party) ☐ Democratic ☐ Republican ☐ a preliminary election ☐ an election ☐ all elections this year
date of election
Green-Rainbow United Independent Party

2 Full name of voter: last name first name middle name or initial.

Miss Ms. Mrs. Me.

3 Voter's legal voting residence: street and number, apt number city or town ward/precinct (if known)

Check if applicable: ☐ The voter is an active duty service member/dependent family member outside Massachusetts.
Check if applicable: ☐ The voter is living outside the United States and the above address is the voter's last residence in the U.S.

4 Voter's mailing address (if different than #3):
Mail ballot to me at this address: street & number p.o. box, if any city or town state or country zip code

5 Voter's date of birth: month day year

6 Voter's Telephone (optional): ☐ Check if unlisted

7 Voter's E-mail address (optional):

8 Your name and relationship to the voter:

Printed name: Relationship:

9 Your address: street & number city or town zip code

10 Today's date: month day year

11 Your Signature:
(under penalty of perjury)